

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # 362345	
1. Entity Name LEITZ MUSIC COMPANY, INC.	

Principal Place of Business 508 HARRISON AVENUE PANAMA CITY, FL 32401	Mailing Address 508 HARRISON AVENUE PANAMA CITY, FL 32401
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DO NOT WRITE IN THIS SPACE



02232006 No Chg-P CR2E034 (11/05)

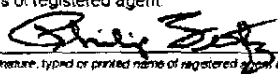
4. FEI Number 59-1308767	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**LEITZ, PHILIP
8134 CLUSTER ROAD
PANAMA CITY, FL 32404**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **4-13-06**
Signature, typed or printed name of registered agent and use if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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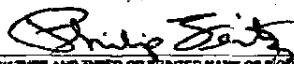
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LEITZ, HONEY W MS 1405 E 2ND CT PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C LEITZ, JULIE MRS 8134 CLUSTER RD. PANAMA CITY, FL 32404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEITZ, PHILIP MR 8134 CLUSTER ROAD PANAMA CITY, FL 32404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BRAMLETT, KEVIN MR 1211 CHRISTEL AVENUE PANAMA CITY, FL 32401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

U00000511122
04/29/06-80035-006 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **4-13-06** **850 769-0111**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #